

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)USE FEC MAILING LABEL
OR TYPE OR PRINT ▼Example: If typing, type
over the lines

Graves for Congress

ADDRESS (number and street)
▼

2345 Grand Boulevard - Suite 2400

☐Check if different
than previously
reported. (ACC)

Kansas City

MO

64108

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00359034

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

MO

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☒

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

11

23

2010

through

12

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Jean Paul Bradshaw

Signature of Treasurer

Electronically Filed by Jean Paul Bradshaw

Date

01

19

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

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Write or Type Committee Name

Graves for Congress

Report Covering the Period:

From:

M M
1 1D D
2 3Y Y Y Y
2 0 1 0

To:

M M
1 2D D
3 1Y Y Y Y
2 0 1 0

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	6650.00	6650.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	6650.00	6650.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	36251.29	89570.55
(b) Total Offsets to Operating Expenditures (from Line 14).....	553.99	553.99
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	35697.30	89016.56
8. Cash on Hand at Close of Reporting Period (from Line 27).....	29962.08	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	21226.41	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name
Graves for Congress

Report Covering the Period:

From:

M M
1 1D D
2 3Y Y Y Y
2 0 1 0

To:

M M
1 2D D
3 1Y Y Y Y
2 0 1 0**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

2500.00

2500.00

(ii) Unitemized.....

150.00

150.00

(iii) TOTAL of contributions

2650.00

2650.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACS).....

4000.00

4000.00

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS
(other than loans)

6650.00

6650.00

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.).....

553.99

553.99

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.42

0.42

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

7204.41

7204.41

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	36251.29	89570.55
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	36251.29	89570.55

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	59008.96
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	7204.41
25. SUBTOTAL (add Line 23 and Line 24).....	66213.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	36251.29
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	29962.08

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 21

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Air Conditioning Contractors of America

Mailing Address 2800 Shirlington Road - Suite 300

City

Arlington

State

VA

Zip Code

22206

FEC ID number of contributing
federal political committee.**C**

C00100974

Name of Employer

Occupation

Receipt For: 2012

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	1	0

Transaction ID: 10113.C14973

Amount of Each Receipt this Period

3000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Missouri Corn Growers Assn PAC

Mailing Address 3118 Emerald Lane

City

Jefferson City

State

MO

Zip Code

65109

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2012

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	1	0

Transaction ID: 10113.C14974

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

4000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Dan Fordice

Mailing Address 2500 Dana Rd

City

Vicksburg

State

MS

Zip Code

39180

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fordice Construction

Occupation

Vice President

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 1 0

Transaction ID: 10113.C14982

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Steve Golding

Mailing Address 101 Lee Street

City

Vicksburg

State

MS

Zip Code

39180

FEC ID number of contributing
federal political committee.

C

Name of Employer
Golding Barge Line

Occupation

President

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 1 0

Transaction ID: 10113.C14983

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Hunter Fordice

Mailing Address P. O. Box 1101

City

Vicksburg

State

MS

Zip Code

39181

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fordice Construction

Occupation

President

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 1 0

Transaction ID: 10113.C14984

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

William Guthrie

Mailing Address P. O. Box 38

City

Newellton

State

LA

Zip Code

71357

FEC ID number of contributing
federal political committee.

C

Name of Employer
Newellton Gin Co.

Occupation

General Manager

Receipt For: 2012

☒ Primary
 ☐ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	0		2	0	1	0

Transaction ID: 10113.C14985

Amount of Each Receipt this Period

300.00

Receipt

B.

Full Name (Last, First, Middle Initial)

John Paris

Mailing Address 2 1/2 Glenwood Circle

City

Vicksburg

State

MS

Zip Code

39180-3942

FEC ID number of contributing
federal political committee.

C

Name of Employer
May & Company

Occupation

Partner

Receipt For: 2012

☒ Primary
 ☐ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	0		2	0	1	0

Transaction ID: 10113.C14986

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

2500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 21

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

Missourians for Conservative Values

Mailing Address 506 South 1st St., Apt. 10

City

Savannah

State

MO

Zip Code

64485-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

440.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	1	0

Transaction ID: 10113.C14978

Amount of Each Receipt this Period

440.56

Offsets to Operating Expe-
nditu

SUBTOTAL of Receipts This Page (optional)

440.56

TOTAL This Period (last page this line number only)

440.56

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Country Club Bank Mailing Address PO Box 410889	Transaction ID: 10113.E5137 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 1 0</div> </div>
City Kansas City State MO Zip Code 64141- Purpose of Disbursement Bank Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>57.67</div> BANK SERVICE CHARGE
B. Full Name (Last, First, Middle Initial) Congressional Institutional Institute Mailing Address 316 Pennsylvania Ave., SE #403 City Washington State DC Zip Code 20002- Purpose of Disbursement House Congressional Retreat Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10113.E5135 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 2 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>1044.00</div> HOUSE CONGRESSIONAL RETREAT
C. Full Name (Last, First, Middle Initial) Patek & Associagtes LLC Mailing Address P. O. Box 1933 City Jefferson City State MO Zip Code 65102- Purpose of Disbursement Fund Raising Campaign Mgt. & Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10113.E5122 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 0 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>12500.00</div> FUND RAISING CAMPAIGN MGT- & EXPENSE

SUBTOTAL of Disbursements This Page (optional)

13601.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) The Gula Graham Group Mailing Address 700 12th St. NW	Transaction ID: 10113.E5124 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 0 / 2 0 1 0</div> </div>
City Washington State DC Zip Code 20006- Purpose of Disbursement Fundraising Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>8825.00</div> FUNDRAISING EXPENSE
B. Full Name (Last, First, Middle Initial) Endis Inc. Mailing Address 3002 East Sunshine Ave. City Springfield State MO Zip Code 65804- Purpose of Disbursement Internet Design and Set-Up Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10113.E5121 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 5 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>275.00</div> INTERNET DESIGN AND SET-UP
C. Full Name (Last, First, Middle Initial) Country Club Bank Mailing Address PO Box 410889 City Kansas City State MO Zip Code 64141- Purpose of Disbursement Bank Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10113.E5087 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 3 0 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>63.22</div> BANK SERVICE CHARGE

SUBTOTAL of Disbursements This Page (optional)

9163.22

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) The Gula Graham Group	Transaction ID: 10113.E5123 Date of Disbursement
Mailing Address 700 12th St. NW	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 2 0 / 2 0 1 0</div> </div>
City Washington State DC Zip Code 20006- Purpose of Disbursement Postage Candidate Name	Amount of Each Disbursement this Period <div>65.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	POSTAGE
B. Full Name (Last, First, Middle Initial) UMB Visa	Transaction ID: 10113.E5095 Date of Disbursement
Mailing Address 1010 Grand Boulevard	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 1 5 / 2 0 1 0</div> </div>
City Kansas City State MO Zip Code 64106- Purpose of Disbursement Credit Card: See Below Candidate Name	Amount of Each Disbursement this Period <div>4286.76</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CREDIT CARD: SEE BELOW
C. Full Name (Last, First, Middle Initial) Bluffs Catering Co	Transaction ID: 10113.E5101 Date of Disbursement
Mailing Address 17644 US Highway 136	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 1 5 / 2 0 1 0</div> </div>
City Rock Port State MO Zip Code 64482- Purpose of Disbursement Staff Christmas Party Food/Beverage Candidate Name	Amount of Each Disbursement this Period <div>2197.11</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: STAFF CHRISTMAS PARTY FOOD/BEVERAGE

SUBTOTAL of Disbursements This Page (optional)

4351.76

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Hyvee Food & Drug	Transaction ID: 10113.E5107 Date of Disbursement
Mailing Address 207 N.E. Englewood Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 5 / 2 0 1 0</div> </div>
City State Zip Code Kansas City MO 64118- Purpose of Disbursement Fundraising Holiday Reception Candidate Name	Amount of Each Disbursement this Period <div>1202.08</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> [MEMO ITEM] MEMO: FUNDRAISING HOLIDAY RECEPTION </div>
B. Full Name (Last, First, Middle Initial) Olive or Twist	Transaction ID: 10113.E5110 Date of Disbursement
Mailing Address 2701 Running Horse Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 5 / 2 0 1 0</div> </div>
City State Zip Code Platte City MO 64079-7707 Purpose of Disbursement Fundraising Holiday Event Candidate Name	Amount of Each Disbursement this Period <div>472.58</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> [MEMO ITEM] MEMO: FUNDRAISING HOLIDAY EVENT </div>
C. Full Name (Last, First, Middle Initial) Wing Nuts	Transaction ID: 10113.E5115 Date of Disbursement
Mailing Address 19206 Highway O	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 5 / 2 0 1 0</div> </div>
City State Zip Code Tarkio MO 64491- Purpose of Disbursement Travel Expense: Aviation Fuel Candidate Name	Amount of Each Disbursement this Period <div>176.22</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> [MEMO ITEM] MEMO: TRAVEL EXPENSE: AVIATION FUEL </div>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

A.

Full Name (Last, First, Middle Initial)
Lathrop & Gage LLP

Mailing Address 2345 Grand Boulevard - Suite 2400

City State Zip Code
Kansas City MO 64108-2684

Purpose of Disbursement
Copying faxing postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 10113.E5089

Date of Disbursement

/ /

Amount of Each Disbursement this Period

156.48

COPYING FAXING POSTAGE

B.

Full Name (Last, First, Middle Initial)
Country Club Bank

Mailing Address PO Box 410889

City State Zip Code
Kansas City MO 64141-

Purpose of Disbursement
Credit Card: See Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 10113.E5125

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2628.95

CREDIT CARD: SEE BELOW

C.

Full Name (Last, First, Middle Initial)
Break Time

Mailing Address 204 South US 71 Highway

City State Zip Code
Savannah MO 64485-

Purpose of Disbursement
Gasoline and propane

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 10113.E5126

Date of Disbursement

/ /

Amount of Each Disbursement this Period

239.01

[MEMO ITEM]

MEMO: GASOLINE AND PROPANE

SUBTOTAL of Disbursements This Page (optional)

2785.43

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car	Transaction ID: 10113.E5127 Date of Disbursement
Mailing Address 927 North Kansas Street	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 2 / 2 0 1 0</div> </div>
City State Zip Code Arlington VA 22201-	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Expense: Rental Car Candidate Name	<div> <div>200.26</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: TRAVEL EXPENSE: RENTAL CAR
B. Full Name (Last, First, Middle Initial) Gomers Fine Wine & Spirits	Transaction ID: 10113.E5128 Date of Disbursement
Mailing Address 6298 North State Route 9	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 2 / 2 0 1 0</div> </div>
City State Zip Code Parkville MO 64152-3559	Amount of Each Disbursement this Period
Purpose of Disbursement Staff Christmas Party Candidate Name	<div> <div>1457.51</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: STAFF CHRISTMAS PARTY
C. Full Name (Last, First, Middle Initial) Hen House	Transaction ID: 10113.E5129 Date of Disbursement
Mailing Address 6238 N. Chatham Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 2 / 2 0 1 0</div> </div>
City State Zip Code Kansas City MO 64151-	Amount of Each Disbursement this Period
Purpose of Disbursement Paper Goods for Staff Christmas Par Candidate Name	<div> <div>271.56</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: PAPER GOODS FOR STAFF CHRISTMAS PAR

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Home Depot	Transaction ID: 10113.E5130 Date of Disbursement
Mailing Address 5898 N. Church Rd.	<div> <div>12</div> <div>22</div> <div>2010</div> </div>
City Kansas City State MO Zip Code 64158-	Amount of Each Disbursement this Period
Purpose of Disbursement Supplies for Propane Heaters Candidate Name	<div>319.87</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: SUPPLIES FOR PROPANE HEATERS
B. Full Name (Last, First, Middle Initial) AT&T	Transaction ID: 10113.E5088 Date of Disbursement
Mailing Address P O Box 8229	<div> <div>12</div> <div>01</div> <div>2010</div> </div>
City Aurora State IL Zip Code 60572-	Amount of Each Disbursement this Period
Purpose of Disbursement Cell Phone Expense Candidate Name	<div>124.34</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	CELL PHONE EXPENSE
C. Full Name (Last, First, Middle Initial) UMB Visa	Transaction ID: 10113.E5097 Date of Disbursement
Mailing Address 1010 Grand Boulevard	<div> <div>12</div> <div>15</div> <div>2010</div> </div>
City Kansas City State MO Zip Code 64106-	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card: See Below Candidate Name	<div>255.31</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

379.65

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Aladin Storage, Inc.	Transaction ID: 10113.E5098 Date of Disbursement
Mailing Address 701 North 291 Highway	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 1 5 / 2 0 1 0</div> </div>
City State Zip Code Liberty MO 64068-	Amount of Each Disbursement this Period
Purpose of Disbursement Storage Rental Candidate Name	<div>215.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: STORAGE RENTAL
B. Full Name (Last, First, Middle Initial) Federal Express Shipping	Transaction ID: 10113.E5099 Date of Disbursement
Mailing Address 2903 Sprinkle Avenue	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 1 5 / 2 0 1 0</div> </div>
City State Zip Code Memphis TN 38118-	Amount of Each Disbursement this Period
Purpose of Disbursement Shipping Charges Candidate Name	<div>40.31</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: SHIPPING CHARGES
C. Full Name (Last, First, Middle Initial) UMB Visa	Transaction ID: 10113.E5096 Date of Disbursement
Mailing Address 1010 Grand Boulevard	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 1 5 / 2 0 1 0</div> </div>
City State Zip Code Kansas City MO 64106-	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card: See Below Candidate Name	<div>328.88</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

328.88

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) Hyvee Food & Drug	Transaction ID: 10113.E5116 Date of Disbursement
Mailing Address 207 N.E. Englewood Road	<div> <div>^M12</div> <div>/</div> <div>^D15</div> <div>/</div> <div>^Y2010</div> </div>
City Kansas City State MO Zip Code 64118-	Amount of Each Disbursement this Period
Purpose of Disbursement Refund: Fundraising Holiday Recepti Candidate Name	<div>-550.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: REFUND: FUNDRAISING HOLIDAY RECEPTI </div>
B. Full Name (Last, First, Middle Initial) Hyvee Food & Drug	Transaction ID: 10113.E5117 Date of Disbursement
Mailing Address 207 N.E. Englewood Road	<div> <div>^M12</div> <div>/</div> <div>^D15</div> <div>/</div> <div>^Y2010</div> </div>
City Kansas City State MO Zip Code 64118-	Amount of Each Disbursement this Period
Purpose of Disbursement Fundraising Holiday Reception Candidate Name	<div>41.16</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: FUNDRAISING HOLIDAY RECEPTION </div>
C. Full Name (Last, First, Middle Initial) Olive or Twist	Transaction ID: 10113.E5118 Date of Disbursement
Mailing Address 2701 Running Horse Road	<div> <div>^M12</div> <div>/</div> <div>^D15</div> <div>/</div> <div>^Y2010</div> </div>
City Platte City State MO Zip Code 64079-7707	Amount of Each Disbursement this Period
Purpose of Disbursement Fundraising Holiday Reception Candidate Name	<div>331.42</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: FUNDRAISING HOLIDAY RECEPTION </div>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Graves for Congress

A.

Full Name (Last, First, Middle Initial)
Outlaw Cigar

Mailing Address 6234 North Chatham Avenue

City State Zip Code
Kansas City MO 64151-

Purpose of Disbursement
Election Night Celebration

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 10113.E5119

Date of Disbursement

/ /

Amount of Each Disbursement this Period

473.78

[MEMO ITEM]

MEMO: ELECTION NIGHT CELEBRATION

B.

Full Name (Last, First, Middle Initial)
Axiom Strategies LLC

Mailing Address 1251 NW Briarcliff Parkway
Suite 85

City State Zip Code
Kansas City MO 64116-

Purpose of Disbursement
Printing and postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 10113.E5094

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5419.88

PRINTING AND POSTAGE

SUBTOTAL of Disbursements This Page (optional)

5419.88

TOTAL This Period (last page this line number only)

36030.49

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Graves for Congress**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Boyles Motors Inc.Nature of Debt (Purpose):
Vehicle Lease

Mailing Address 204 North Market Street

City State ZIP Code
Maryville MO 64468-

Outstanding Balance Beginning This Period

500.00

Transaction ID: LS60802.E42

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KWRT-AM / KWRT-FMNature of Debt (Purpose):
Radio Advertising

Mailing Address 1600 Radio Hill Road

City State ZIP Code
Boonville MO 65233-

Outstanding Balance Beginning This Period

857.65

Transaction ID: LS60802.E45

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

857.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Willard DowdenNature of Debt (Purpose):
Rent for Nodaway Co. Repu-
bican Com

Mailing Address Route 1, Box 116

City State ZIP Code
Burlington Junction MO 64428-

Outstanding Balance Beginning This Period

200.00

Transaction ID: LS60802.E46

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

1) **SUBTOTALS** This Period This Page (optional).....

1557.65

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Graves for Congress**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Missouri Right to Life PACNature of Debt (Purpose):
Membership Labels

Mailing Address PO Box 651

City State ZIP Code
Jefferson City MO 65102-

Outstanding Balance Beginning This Period

1087.00

Transaction ID: LS60802.E49

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1087.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lathrop & Gage LLPNature of Debt (Purpose):
Professional Fees/GVC

Mailing Address 2345 Grand Boulevard - Suite 2400

City State ZIP Code
Kansas City MO 64108-2684

Outstanding Balance Beginning This Period

3204.00

Transaction ID: LS90415.E4279

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3204.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Lukens CompanyNature of Debt (Purpose):
PrintingMailPostageData

Mailing Address 2800 Shirlington Road - 9th Floor

City State ZIP Code
Arlington VA 22202-

Outstanding Balance Beginning This Period

1877.76

Transaction ID: LS90415.E4278

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1877.76

1) **SUBTOTALS** This Period This Page (optional).....

6168.76

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Graves for Congress**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Stor SafeNature of Debt (Purpose):
Storage Rental

Mailing Address 1501 Burlington

City State ZIP Code
Kansas City MO 64116-

Outstanding Balance Beginning This Period

1000.00

Transaction ID: LS81203.E4051

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Patek & Associagtes LLCNature of Debt (Purpose):
Fund Raising Campaign Mgt-
& Expense

Mailing Address P. O. Box 1933

City State ZIP Code
Jefferson City MO 65102-

Outstanding Balance Beginning This Period

25000.00

Transaction ID: LS10113.E5122

Amount Incurred This Period

0.00

Payment This Period

12500.00

Outstanding Balance at Close of This Period

12500.00

1) **SUBTOTALS** This Period This Page (optional).....

13500.00

2) **TOTALS** This Period (last page this line number only).....

21226.41

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

21226.41